

# MENASHA HEALTH DEPARTMENT - RESTAURANT / RETAIL FOOD SERVICE INSPECTION REPORT

Business Name <b>Toppers Pizza</b>		Business Address 430 Third Street		County <b>Winnebago</b>		ID # <b>02-71063</b>	
Legal Licensee <b>Smooth Money of IA, LLC</b>		Mailing Address (Licensee) 2916 Lampram Dr, SP, WI`		Telephone # (920 ) 720-2121			
Date of inspection 12/19/14		Bare Hand Contact Plan in Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Type of Establishment <input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Retail <input type="checkbox"/> School <input type="checkbox"/> Liq lic		Is operator Certified <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> pending <input type="checkbox"/> N/A	
<b>Inspection Type</b> <input type="checkbox"/> pre-inspection <input checked="" type="checkbox"/> routine inspection <input type="checkbox"/> Re-inspection <input type="checkbox"/> Complaint <input type="checkbox"/> Downtime <input type="checkbox"/> Non inspection visit				<b>Action Taken</b> <input checked="" type="checkbox"/> Operational <input type="checkbox"/> Conditional Permit 30 days <input type="checkbox"/> Withhold Permit <input type="checkbox"/> License suspended <input type="checkbox"/> License revoked <input type="checkbox"/> Other			
<b>Person in Charge</b>				<b>CFM # and expiration</b> <b>CFM #</b> <b>expiration date</b>			
<b>FOODBORNE ILLNESS RISK FACTORS</b>							
Circle designated compliance status for each item <b>IN</b> -in compliance <b>OUT</b> – out of compliance <b>N/O</b> – not observed <b>N/A</b> – not applicable				Mark an <b>X</b> in appropriate box for <b>COS</b> and/or <b>R</b> <b>COS</b> – corrected on site during inspection <b>R</b> - repeat violation			

COMPLIANCE STATUS			COS	R	COMPLIANCE STATUS			COS	R
<b>DEMONSTRATION OF KNOWLEDGE</b>					<b>POTENTIALLY HAZARDOUS FOOD TEMPERATURE</b>				
1A	IN	Certified food manager, duties	<input type="checkbox"/>	<input type="checkbox"/>	16	NA	Proper cooking time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
1B	IN	Person in charge, ID knowledgeable, duties and responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	17	IN	Proper re-heating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<b>EMPLOYEE HEALTH</b>					<b>CONSUMER ADVISORY</b>				
2	IN	Management awareness, policy present	<input type="checkbox"/>	<input type="checkbox"/>	23	NA	Consumer advisory supplied	<input type="checkbox"/>	<input type="checkbox"/>
3	IN	Proper use of reporting, restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<b>HIGHLY SUSEPTABLE POPULATIONS</b>				
<b>GOOD HYGENIC PRATICES</b>					24	NA	Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
4	IN	Proper eating, tasting, drinking	<input type="checkbox"/>	<input type="checkbox"/>	<b>CHEMICAL</b>				
5	IN	No discharge from eyes, nose and mouth	<input type="checkbox"/>	<input type="checkbox"/>	25	NA	Food additives approved and properly use	<input type="checkbox"/>	<input type="checkbox"/>
<b>PREVENTING CONTAMINATION FROM HANDS</b>					26	IN	Toxic substances properly identified, stored, used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	IN	Hands cleaned and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
7	OUT	No bare hand contact or using approved plan	<input type="checkbox"/>	<input type="checkbox"/>	27	NA	Compliance with variance, specialized process, HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>
8	IN	Adequate hand washing facilities supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<b>Risk Factors:</b> are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.  Risk factor violations should be corrected on site during the inspection unless there is some reason that correction cannot be immediately made.				
<b>APPROVED SOURCE</b>									
9	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>					
10	NO	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>					
11	IN	Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>					
12	NA	Records available, shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>					
<b>PROTECTION FROM CONTAMINATION</b>									
13	IN	Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>					
14	OUT	Food contact surfaces cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>					
15	IN	Proper disposition of returned, previously served, reconditioned & unsafe food	<input type="checkbox"/>	<input type="checkbox"/>					

GOOD RETAIL PRACTICES									
Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food. Mark an X in box if item is not in compliance. Mark an X in appropriate box for COS/R. <b>COS</b> – corrected on site during inspection <b>R</b> - repeat violation									
<b>SAFE FOOD AND WATER</b>			<b>COS</b>	<b>R</b>	<b>PROPER USE OF UTENSILS</b>				
28	NA	Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	41	IN	In use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>
29	IN	Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	42	IN	Utensils equipment and linen properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
30	NA	Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	43	OUT	Single-use and Single service articles properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
<b>FOOD TEMPERATURE CONTROL</b>					44	IN	Gloves properly used	<input type="checkbox"/>	<input type="checkbox"/>
31	IN	Proper cooling methods used; adequate equip. for temperature control.	<input type="checkbox"/>	<input type="checkbox"/>	<b>UTENSILS AND EQUIPMENT</b>				
32	NO	Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	45	IN	Food and nonfood contact surfaces; cleanable, properly designed, constructed and used	<input type="checkbox"/>	<input type="checkbox"/>
33	IN	Approved thawing methods used.	<input type="checkbox"/>	<input type="checkbox"/>	46	IN	Warewash facilities; installed, maintained, and used	<input type="checkbox"/>	<input type="checkbox"/>
34	IN	Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	47	IN	Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
<b>FOOD PROTECTION</b>					<b>PHYSICAL FACILITIES</b>				
35	IN	Food properly labeled original container	<input type="checkbox"/>	<input type="checkbox"/>	48	IN	Hot and cold water available, under pressure	<input type="checkbox"/>	<input type="checkbox"/>
36	IN	Pests and animals not present, no unauthorized persons	<input type="checkbox"/>	<input type="checkbox"/>	49	IN	Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
37	IN	Contamination prevented during food preparation storage and display	<input type="checkbox"/>	<input type="checkbox"/>	50	IN	Sewage and wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
38	IN	Personal cleanliness, jewelry	<input type="checkbox"/>	<input type="checkbox"/>	51	IN	Toilet facilities, properly constructed, supplied and clean	<input type="checkbox"/>	<input type="checkbox"/>
39	OUT	Wiping cloths; properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	52	IN	Garbage and refuse, properly disposed facilities and maintained	<input type="checkbox"/>	<input type="checkbox"/>
40	IN	Plant food cooking for hot hold Washing all fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	53	IN	Physical facilities installed maintained and clean	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	54	IN	Adequate ventilation and lighting, designed and used.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Menu Review:</b> Review Conducted <input checked="" type="checkbox"/> yes <input type="checkbox"/> no - New menu items <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No New items  <b>New processes:</b> Does new process require variance <input type="checkbox"/> yes <input type="checkbox"/> no What interim step was taken pending variance  <b>Addition to Consumer Advisory</b> <input type="checkbox"/> yes <input type="checkbox"/> no New menu item which requires consumer advisory  <b>Concerns / Corrections Suggested:</b>
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TEMPERATURES – Refrigeration/hot hold/cook					
Item / Location	Temp	Item / Location	Temp	Item / Location	Temp
prep cooler tomato	35°F	walk in cooler sauce	36°F	Freezer	°
--	°F	--	°	--	°
Cook --	°F	Cook --	°	Cook --	°

WAREWASHING INFORMATION					
Machine Name	Sanitization Method	Thermo Label confirmed	PPM/ temp	Sanitizer Name / Approved Y/N	Sanitizer Type
4 compartment sink	manual sanitize	<input type="checkbox"/> yes <input type="checkbox"/> No	--ppm / °F rinse	QUAT <input type="checkbox"/> Yes <input type="checkbox"/> No	QUAT

**CDC Risk Code Factor Abbreviations and Violation by Category Numbers Table**  
(Use this table to group CDC risk factor listed below with violation from page 1)

Unsafe Sources (US)	Inadequate Cooking (IC)	Improper Hold (IH)	Cross Contamination (CC)	Personal Hygiene (PH)	Other CDC Factors (O)
9	16	18	13	3	1A
10	17	19	14	4	1B
11		20	15	5	2
12		21		6	23
		22		7	24
				8	25
					26

For each violation sited, use above table and record CDC Risk Code Factor abbreviation (such as “US” or “IH”), violation number, list from the Wisconsin Food Code (WFC) the reference number that refers to the area in violation.

**Record CDC risk code abbreviation, violation # from 1<sup>st</sup> page, violation description, Food Code reference, corrective action, and score.**

CDC Code	Violation number P- Priority Pf- Priority Foundation	Description of violation, WFC Reference Number including code reference text / Corrective Action Required – Note date(s) of repeat violations on previous inspections.	Compliance Date/ Corrected on site (COS)
PH	7 <input checked="" type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	Food employee noted touching finished (cooked) pizzas with bare hands. <b>WISCONSIN FOOD CODE REFERENCE</b> <b>3–301.11 Preventing Contamination from Hands.</b> (A) FOOD EMPLOYEES shall wash their hands as specified under § 2–301.12. (B) <i>Except when washing fruits and vegetables as specified under § 3–302.15 or as specified in ¶ (D) of this section,</i> FOOD EMPLOYEES may not contact exposed, READY-TO-EAT FOOD with their bare hands and shall use suitable UTENSILS such as deli tissue, spatulas, tongs, single-use gloves, or dispensing EQUIPMENT. P <b>CORRECTIVE ACTION</b> <b>Reinforce with all food employees that foods which are in ready to eat form may not be contacted with bare hands. Gloved hands or suitable utensils must be used.</b>	COS
CC	14 <input checked="" type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	Discussion with food employee regarding the frequency of switching out food utensils used with potentially hazardous (TCS) foods.	COS

	<p><b>WISCONSIN FOOD CODE REFERENCE</b>  <b>4-602.11 Equipment Food-Contact Surfaces and Utensils.</b>  (A) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be cleaned:  (C) Except as specified in ¶ (D) of this section, if used with POTENTIALLY HAZARDOUS FOOD (TIME/TEMPERATURE CONTROL FOR SAFETY FOOD), EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be cleaned throughout the day at least every 4 hours. P</p> <p><b>CORRECTIVE ACTION</b>  All pizza cutters and tongs in use in your pizza staging area must be changed out or cleaned sanitized every 4 hours.</p>	
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Use this section for Good Retail Practice (GRP) Violations

Violation #	Description of violation, WFC Reference Number / Corrective Action Required	Compliance Date/ Corrected during inspection
<b>39</b> <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>In use wipe rag bucket was noted immediately adjacent to exposed single use food containers.</p> <p><b>WISCONSIN FOOD CODE REFERENCE</b>  <b>3-304.14 Wiping Cloths and Working Containers, Use Limitation.</b>  (A) Cloths in-use for wiping FOOD spills from TABLEWARE and carry-out containers that occur as FOOD is being served shall be:  (E) Containers of chemical sanitizing solutions specified in Subparagraph (B) (1) of this section in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of FOOD, EQUIPMENT, UTENSILS, LINENS, SINGLE-SERVICE, OR SINGLE-USE ARTICLES.</p> <p><b>CORRECTIVE ACTION</b>  In use wipe rag buckets should be placed so that splash from handling wipe rags does not potentially contaminate single use food containers.</p>	<b>COS</b>
<b>43</b> <input type="checkbox"/> P <input type="checkbox"/> Pf <input checked="" type="checkbox"/> C	<p>Unfolded pizza boxes noted stored directly on the floor including a stack directly adjacent and below the hand wash sink which would be subject to potential splash. Also a tool for scraping pizza oven grate noted place on top of pizza boxes (boxes were covered in plastic packaging).</p> <p><b>WISCONSIN FOOD CODE REFERENCE</b>  <b>4-903.11 Equipment, Utensils, Linens, and Single-Service and Single-Use Articles.</b>  (A) Except as specified in ¶ (D) of this section, cleaned EQUIPMENT and UTENSILS, laundered LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES shall be stored:  (1) In a clean, dry location;  (2) Where they are not exposed to splash, dust, or other contamination; and  (3) At least 15 cm (6 inches) above the floor.</p> <p><b>CORRECTIVE ACTION</b>  Pizza boxes should be stored off the floor and not potentially exposed to splash from the hand wash sink. Oven cleaning utensils should be maintained in a designated area away from food and single use containers</p>	<b>COS</b>
<input type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	<p>WISCONSIN FOOD CODE REFERENCE</p> <p><b>CORRECTIVE ACTION</b></p>	
<input type="checkbox"/> P <input type="checkbox"/> Pf <input type="checkbox"/> C	<p>WISCONSIN FOOD CODE REFERENCE</p> <p><b>CORRECTIVE ACTION</b></p>	
<input type="checkbox"/> P	WISCONSIN FOOD CODE REFERENCE	

<input type="checkbox"/> Pf <input type="checkbox"/> C	<b>CORRECTIVE ACTION</b>	
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Long term controls / approvals / special processes in place

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**Critical Violations which require greater than one re-inspection and/or repeated CDC Risk Factors violation(s) which are cited on 3 consecutive inspections shall result in the issuance of a re-inspection fee. Re-inspection fees are set based on the complexity of the establishment as follows:**

- **Complex restaurants \$250.00**
- **Moderate restaurants \$200.00**
- **Simple restaurants \$150.00**
- **Retail >1 M \$300.00**
- **Retail 25K-1M \$250.00**
- **Retail remaining \$200.00**

**Violations must be corrected by the compliance date, unless some arrangement has been made with Menasha Health Department. Re-inspection fees will be assessed to all CDC Risk Factor violations requiring more than (1) re-inspection or if the same CDC Risk Factor violation is cited on 3 consecutive inspections. Re-inspection fees will be billed to the owner of the establishment. Failure to pay re-inspection fee shall result in the following potential legal actions:**

- **Temporary revocation of license**
- **License will not be renewed pending payment**
- **Enforcement conference with licensee or licensee representative which would require signed compliance agreement.**

***Operators who wish to challenge the assessment of a re-inspection fee shall submit in writing circumstances and reason that they feel the re-inspection fee should not have been assessed. This statement must be submitted to the Public Health Director. The issue will then be addressed by the City of Menasha Board of Health. Any violations and /or enforcement shall be complied with pending appeal.***

**The City of Menasha posts all Health Department Inspection reports on the City of Menasha Web-Site.**

**Inspection Narrative and information on non-violation observations and/or suggestions:**

**Reminder** – Formally discuss employee health and illness reporting requirements. Employee Health Reporting Agreement Forms provided during pre-inspection. Food employees should be able to answer questions related to illness, symptoms which require reporting.

**Reminder-** Remind food employees to audit coolers and dispose of any dated product.

**I understand and agree to comply with the corrections ordered in this report. I understand the failure to comply could result in legal action including loss of license.**

<b>PIC signature or authorized employee</b>	<b>Date</b>	<b>Sanitarian Signature Todd Drew, R.S.</b>	<b>Date</b>

**Food Safety Fact Sheets Attached:**

<input type="checkbox"/> Employee Health	<input type="checkbox"/> Employee Reporting Agreement	<input type="checkbox"/> Personal Hygiene	<input type="checkbox"/> Bare hand contact
<input type="checkbox"/> Responsibilities of the PIC	<input type="checkbox"/> Disposable glove use	<input type="checkbox"/> Cross – Contamination	<input type="checkbox"/> Demonstration of Knowledge
<input type="checkbox"/> Cooling Procedures	<input type="checkbox"/> Thawing Procedures	<input type="checkbox"/> Active Managerial Control	<input type="checkbox"/> Certified Food Manager
<input type="checkbox"/> Consumer Advisory	<input type="checkbox"/> HACCP	<input type="checkbox"/> HACCP Hazard Analysis	<input type="checkbox"/> Serving Safe Food
<input type="checkbox"/> Pre-Inspection	<input type="checkbox"/> Time as a Health Control	<input type="checkbox"/> Allergens	<input type="checkbox"/> Thermometer Calibration
<input type="checkbox"/> Catering	<input type="checkbox"/> Cooking Temperatures	<input type="checkbox"/> Microwave Cooking	<input type="checkbox"/> Interpreting the Inspection

<input type="checkbox"/> Variance / HACCP	<input type="checkbox"/> Frozen Foods	<input type="checkbox"/> Receiving	Report
<input type="checkbox"/> Common Foodborne Illnesses	<input type="checkbox"/> Outdoor Events	<input type="checkbox"/> Serving Safe Food	<input type="checkbox"/> Chemical / Physical Contamination
<input type="checkbox"/> Organizing Coolers	<input type="checkbox"/> Date Marking		<input type="checkbox"/> Effective Sanitizing